



OFFICE OF THE CDMO & DISTRICT MISSION DIRECTOR, DEOGARH
DISTRICT PROGRAMME MANAGEMENT UNIT (DPMU)
(Department of Health & Family Welfare, Govt. of Odisha)
DISTRICT HEAD QUARTER HOSPITAL, AT/PO/DIST. - DEOGARH, 768 108
☐ (06641) 226103, Fax : (06641) 226103, E-mail : nhmdeogarh@gmail.com



ZILLA SWASTHYA SAMITI, DEOGARH
(Deptt. of Health & FW, Govt. of Odisha.)



NO. 4589

Dt. 4.11.22

[Tender Call Notice]

Sealed Tenders are invited from registered suppliers/agencies/authorized dealers for supply of Lab Reagent, Medical consumable & Diagnostic Kit. The tender documents shall have to submit in one envelope containing two separate envelopes, one for technical bid & another for financial bid through speed post/register post/courier only on or before 21.11.2022 by 1.00PM to the office of CDM & PHO, DHH, Deogarh .The quotation will open on the Dt.22.11.2022 at 04.00PM in the presence of bidders or their authorized representative. The tender paper along with terms and conditions will be available in the website www.deogarh.nic.in & deposit the tender paper cost of Rs 2000/- in shape of DD in favour of "ZSS/ Non- NRHM Funds Account, Deogarh Payable at Deogarh", which is not refundable. The authority reserves right to accept or reject any or all the tender without assigning any reason thereof. The envelope containing the tender document must be clearly super scribed as "Tender for supply of Lab Reagent, Medical consumable & Diagnostic Kit"

Sd/-

CDM & PHO cum- District Mission Director, Deogarh

[Handwritten Signature]
4/11/22

Chief District Medical &
Public Health Officer
DEOGARH

**TERMS, CONDITIONS & SPECIFICATION FOR
SUPPLY LAB REAGENT, MEDICAL CONSUMABLES & DIGNOSTIC KIT FOR
A PERIOD OF ONE YEAR.**

Name of the District / Health Institution: Deogarh
(HEALTH & F.W. DEPTT., GOVT. OF ORISSA)

Bid Reference No. -C.D.M. & P.H.O. DEOGARH (4589/4.11.2022)

**TENDER DOCUMENT
FOR SUPPLY OF LAB REAGENT, MEDICAL CONSUMABLES & DIGNOSTIC KIT FOR
A PERIOD OF ONE YEAR.**

Bid document may be downloaded from Web site-www.deogarh.nic.in

LAST DATE & TIME OF RECEIPT OF BID DOCUMENTS : Dt. 21.11.2022 Upto 1 P.M
DATE & TIME OF OPENING OF TECHNICAL BID : Dt. 22 .11.2022 at 4 P.M.
DATE OF OPENING OF FINANCIAL BID : Will be intimated later on
after 22.11.2022.

PLACE OF OPENING OF BID DOCUMENTS
AND
ADDRESS FOR COMMUNICATION : O/o CDM & PHO, Deogarh District Head
Quarter Hospital, At/Po/Dist -
Deogarh, PIN - 768108
AND
RECEIPT OF BID DOCUMENTS

Tel: 06641-226103

Email id: nhmdeogarh@gmail.com

OFFICE OF THE CDM & PHO: DEOGARH


Chief District Medical &
Public Health Officer
DEOGARH

TERMS AND CONDITIONS FOR SUPPLY OF LAB REAGENT & MEDICAL CONSUMABLE & DIAGNOSTIC KIT

- 1.1 Sealed tenders will be received up to 1 P.M. of dt. 21.11.2022, in the office of the C.D.M. & P.H.O Deogarh for the procurement of Lab reagent, medical consumable, diagnostic kit. Any tender received after the due date & time will be rejected. The tenders will be received through Regd. Post / Courier services / Speed Post only.
- 1.2 The bidder(s) are to submit their tender documents in one envelope containing two separate envelopes, one for technical bid & another for financial bid, which should be super scribed as **"Tender for procurement of Lab reagent, medical consumable, diagnostic kit"** to the O/o CDM&PHO, District Head Quarter Hospital, At/Po/Dist – Deogarh, PIN – 768108 Through Speed Post / Regd. Post/ Courier only" by 21.11.2022, 1.00PM.
- 1.3 The Sealed envelope containing the tender document submitted by the bidders will be opened in the, office of the C.D.M. & P.H.O, Deogarh at 4 P.M on dt. 22.11.2022 under the chairmanship of CDM & PHO, Deogarh and in the presence of the bidders or their authorized representatives.
- 1.4 The C.D.M. & P.H.O Deogarh will be at liberty to terminate the contract either wholly or in part without assigning any reasons thereof. The bidders will not be entitled to any compensation whatsoever for such termination.
- 1.5 The supply should be completed within 10 days from the date of issue of purchase order unless otherwise specified. If no supply is received even after 10 days from the date of issue of the purchase orders from the C.D.M. & P.H.O Deogarh, such orders will stand cancelled automatically without further notice.
- 1.6 In the event of any dispute arising out of the tender, such disputes would be subject to Deogarh jurisdiction.
- 1.7 If the approved supplier fails to execute the supply within the stipulated time, the C.D.M. & P.H.O Deogarh is empowered to purchase the same items from L₂ or L₃ bidder, if they agree with the L₁ rate.
- 1.8 No advance payments towards cost of lab reagent, medical consumable & diagnostic kit will be made to the bidder.
- 1.9 The C.D.M. & P.H.O may allow extension for a maximum period of 2 (two) weeks (14 days), after the stipulated date of supply (i.e. 14 days) with a penalty of 0.5% which will be deducted from the purchase order value as "Liquidated Damage".
- 1.10 The successful supplier shall replace any part or whole system as may be necessary in the event of damage during transit or found damaged on arrival or during installation of the system or if found not in conformity to the specifications at his / their own cost.

ELIGIBILITY CRITERIA

- 2.1 Manufacturing units / Importers/authorized dealer are eligible to participate in the tender provided, they have
 - (i) Valid manufacturing license of the manufacturer or duly acknowledge renewal application with old license issued by the state licensing authority /central licensing approving authority.
 - (ii) Manufacture shall valid GMP/ISO/BIS certificate.
 - (iii) Valid ISO 9001 certification.
 - (iv) Manufacturing unit who has been blacklisted either by the Tender inviting authority or by any state Govt. or Central Govt. organization is not eligible to participate in the tender for that item during the period of blacklisting.
 - (v) Certificate duly filled by the Auditor / Chartered Accountant (as per **Annexure -IV**) that the annual turnover of the tendering firm is more than Rs. 50(Fifty) lakhs or more in each financial year for last preceding 3 (three) financial years.

The following documents should be enclosed in Technical Bid by the tenderer. All the photocopies are to be self attested.

TECHNICAL BID:

- 3.1 Earnest Money Deposit is Rs.20,000.00 (Twenty thousand) only should be submitted in shape of Demand Draft.
- 3.2 Tender Paper Cost Deposit is Rs.2000(Two Thousand) Only should be submitted in shape of Demand Draft.


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- 3.3 Copy of Valid manufacturing license of the manufacturer or duly acknowledge renewal application with old license issued by the state licensing authority /central licensing approving authority.
- 3.4 Copy of Valid ISO certificate.
- 3.5 Copy of GST certificate submitted.
- 3.6 Copy of PAN.
- 3.7 The Original Tender Book with Conditions and the schedules signed by the tenderer at the bottom of each page with his official seal duly affixed.
- 3.8 The declaration form in **Annexure - I** duly signed by the tenderer before Notary Public / Executive Magistrate.
- 3.9 Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor / service centre / contract person / office in Orissa (**Annexure - V**).
- 3.10 Certificate duly filled by the Auditor / Chartered Accountant (as per **Annexure -IV**) that the annual turnover of the tendering firm is more than Rs. 50 (Fifty) lakhs or more in each financial year for last preceding 3 (three) financial years.
- 3.11 Checklist with detail of the documents enclosed in **technical bid** (as per **Annexure - VI**) with page number. The document should be serially arranged as per this **Annexure - VI** and should be securely tied and bound.

Financial BID

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- 4.0 **Financial Bid will be opened only of the bidders who qualify in Technical Bid as per tender specification.**
- 4.1 The Financial bid in the prescribed form (as per **Annexure - II**), The price of the item should be quoted inclusive of taxes and including of insurance, packing, forwarding, freight (door delivery), installation, warranty. The rate should be quoted both in figures and words. **In case of difference in words and figures, words will be taken into consideration for evaluation.**
- 4.2 The Shipping address for the disposable draw sheet & disposable gown is **CDM&PHO, District Head Quarter Hospital, At/Po/Dist - Deogarh** & the billing address is **O/o CDM&PHO, District Head Quarter Hospital, At/Po/Dist - Deogarh, PIN - 768108.**

EARNEST MONEY DEPOSIT

- 5.1 The Earnest Money Deposit shall be Rs.20,000.00 (Ten thousand) only. The Earnest Money Deposit will be submitted in the shape of demand Draft only in favour of ZSS Non- NRHM Funds Account, Deogarh, from any Nationalized Bank payable at Deogarh.
- 5.2 Tender Paper Cost Deposit is Rs.2000(Two Thousand) Only. The Tender paper cost Deposit will be submitted in the shape of demand Draft only in favour of ZSS Non- NRHM Funds Account, Deogarh, from any Nationalized Bank payable at Deogarh.
- 5.3 The EMD of the unsuccessful bidders will be returned back without interest after publication of the approved list and EMD of successful bidder which will be kept as security money and will be refunded after completions of the tender validity period.
- 5.4 The EMD will be forfeited if the tenderer withdraws the tender or doesn't accept the approved list or doesn't supply the items within the stipulated time period.
- 5.5 No claims shall be made against the C.D.M. & P.H.O, Deogarh in respect of interest on earnest money deposit or security deposit or any delayed payment or any other deposit.

EVALUATION:

- 6.1 The rates of the item quoted by the tenderer who qualify technically will be evaluated after taking the following points into consideration: -
 - a) Rate of the medical materials will be taken after inclusion of the all taxes, transportation, insurance, packing, forwarding.
 - b) The cost of the medical materials including all charges Transportation, Insurance, Packaging & forwarding, etc but excluding taxes will be compared and the lowest responsive bidder will be selected.



C.D.M. & P.H.O, Deogarh
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DECLARATION FORM

I / Wehaving my / our
.....office at.....do
declare that I / We have carefully read all the terms & conditions of tender of the
_____, Orissa for the supply of Lab reagent, medical
consumable, diagnostic kit. The approved rate will remain valid for a period of one year
from the date of approval. I will abide with all the terms & conditions set forth in the
tender paper Reference no.....

I/We do hereby declare I/We have not been de-recognised / black listed by any
State Govt. / Union Territory / Govt. of India / Govt. organisation / Govt. Health
Institutions for supply of Not of Standard Quality (NSQ) items / part-supply / non-
supply.

I/We agree that the Tender Inviting Authority can forfeit the Earnest Money
Deposit and blacklist me/us for a period of 5 years if, any information furnished by us
proved to be false at the time of inspection / verification and not complying with the
Tender terms & conditions.

I / We further declare that I / We possess valid manufacturing license /
authorized distributor bearing No.Valid upto I / We
..... do hereby declare that I / we will
supply the _____ as per the terms, conditions & specifications of the
tender document.

Signature of the bidder :

Date :

Name & Address of the Firm:

Affidavit before Executive Magistrate / Notary Public.


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MODEL TEDER FORMAT (FINANCIAL BID)

Sl.No. of the Item	(Annex-III-)	Name of the Company /Brand	Price Which (inclusive all taxes),& including customs duty, packing, Transporting. Cost in Rs. (both in words & figures)	Other Charges (If any)	Total Cost in Rs. (both in words & figures)
(1)	(2)	(3)	(4)	(5)	(6)


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ANNEXURE – III

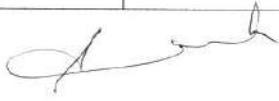
List of the Chemicals , Consumables for DHH,Deogarh					
SL NO	Name of the Chemicals & Consumables	Strength	Unit	Brand	Unit Price including GST & Other Taxes.
1	GLASS SLIDE	50 Piece	Per Unit		
2	SURGICAL SPIRIT	500 ML	Per Unit		
3	FALCON TUBE STAND	10 pc per stand	Per Unit		
4	WEIGHT MACHINE ELECTRONIC	Each	Per Unit		
5	STAINING TRAY	Each	Per Unit		
6	SLIDE KEEPING TRAY	Each	Per Unit		
7	STERILE HAND GLOVES 6.5	(50 Piece Box)	Per Unit		
8	GLUCOMETER	Each	Per Unit		
9	GLUCOMETER WITH STICK	Each	Per Unit		
10	HAEMOGLOBINOMETRE SAHILS METHOD	Each	Per Unit		
11	H B CARD WITH MACHINE	Each	Per Unit		
12	T L C SET	Each	Per Unit		
13	BLOOD GROUPING TEST KIT	Each	Per Unit		
14	URISTIC TOTAL	Each	Per Unit		
15	WIDAL TEST KIT	Each	Per Unit		
16	HBSAG KIT	Each	Per Unit		
18	MICRO PIPETTE STAND	Each	Per Unit		
20	TEST TUBE PLASTIC 12X75MM	Each	Per Unit		
21	BT CT CAPILARY TUBE	Each	Per Unit		
22	TERNIQUIT	Each	Per Unit		
23	WBC DILUTING FLUID	Each	Per Unit		
24	ESR TUBE	Each	Per Unit		
25	EDTA VIAL	Each	Per Unit		
26	SICKLE CELL RAPID TEST	Each	Per Unit		
27	TLC DILUTING FLUID	Each	Per Unit		
28	TLC CHAMBER PIPETTE	Each	Per Unit		
29	NEUBAMBARS CHAMBER	Each	Per Unit		
30	TRBC DILUTING FLUID	Each	Per Unit		
31	PLATELET DILUTING FLUID	Each	Per Unit		
32	TAXOPLASMA ICT KIT	Each	Per Unit		
33	HCV ICT KIT	Each	Per Unit		
34	BENZIDINE POWDER	Each	Per Unit		
35	GLACIAL ACETIC ACID	Each	Per Unit		
36	HYDROGEN PEROXIDE	Each	Per Unit		
37	LUGOL IODIN LIQUID	Each	Per Unit		
38	COLLECTION BOTTLE (sterile)	Each	Per Unit		
39	APPRON	Each	Per Unit		
40	Lable Sticker	Each	Per Unit		
41	N/10 HCL	500 ml	Per Unit		


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42	LANCET	Each	Per Unit		
43	ALCOHOL SWAB	Each	Per Unit		
44	Basic Fuschin	Each 25GM Chem, Name Pararosaniline Hydrochloride , Ch2, H2 N2, Cl, MW 323,8, Metallic Green, Should be available on container, App 85% - 88%	Per Unit		
45	Cabolic Acid (Penol)	500gm Phenol, C2, H2, OH, 94,11 Wt, 40 degree C highly corrosive	Per Unit		
46	Methylated Sprit	500ml Bottle Ethanol denatured 5% Isopropyl Alcohol + 5% Methanol, C2 H2 OH 46,07 wt.	Per Unit		
47	Sulphuric Acid Concentrate	500 ml H2SO4,98.08 wt, clear in colour	Per Unit		
48	Methylene Blue	Each	Per Unit		
49	Immersion Oil	30 ml	Per Unit		
51	Filter Paper	100 sheet Book	Per Unit		
52	Tissue Paper	Roll	Per Unit		
53	Phenyl (5 Ltr jar)	5 ltr jar 40% Phenol	Per Unit		
54	Lenses cleaning Tissue	50 sheet Book	Per Unit		
55	Glass Rod	Each 60 cm	Per Unit		
56	Diamond Marker pencil KD	Each	Per Unit		
57	Foot Operated Bocket	Each	Per Unit		
63	Slide Rack	Each	Per Unit		
64	Spirit Lamp	Each	Per Unit		
65	Cotton	500 gm	Per Unit		
66	Hand Gloves	size -6,7/ Pair	Per Unit		
67	Lint cloth	15 cmx15 cm	Per Unit		
68	Lab Aprons	Plastic L/ XL/XXL	Per Unit		
69	Glass Funnel	250 ml (125 mm long tube)	Per Unit		
70	Falcon Tube	50 ml	Per Unit		
71	Parafilm M	Each	Per Unit		
72	Digital Weighing Machine	Each	Per Unit		
73	Distilled Water	5 lit Each	Per Unit		
74	Microscope Bulb	Each Projection lamp Type7388 6v 20w G4	Per Unit		
75	Sputum Container	Each 50 ml, Screw cap, Transparent, Wide mouth, Plastic	Per Unit		
76	Spray Head Bottle	Each	Per Unit		
77	Forcep	Each	Per Unit		
78	Adult Digital Weighing Machine	Each	Per Unit		


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79	Apron cotton full sleeve	Each	Per Unit		
80	Thermocool Box	Each 14x10x9	Per Unit		
81	Zip lock pouch	Each Medium/Large	Per Unit		
83	Auramine O powder	Each 100gm	Per Unit		
84	potassium permanganate powder	Each 500gm	Per Unit		
85	ethanol (99%)	Each 500ml	Per Unit		
86	HCL (concentrated)	Each 500ml	Per Unit		
87	Oxalic Acid	Each 500gm	Per Unit		
90	Micropipette Tips	Each	Per Unit		
91	(N/10) Hydrochloride Solution (Haemoglobin Estimation)	Each	Per Unit		
92	Haematology test Reagent for Automated haematology Analyzer(5part/3part)	Each	Per Unit		
93	Haematology test under microscope	Each	Per Unit		
94	WBC Diluting Fluid(TLC)	Each 500 ml	Per Unit		
95	Total Eosinophil Count Fluid	Each 500 ml	Per Unit		
96	RBC Diluting Fluid(Total Red Blood cell Count)	Each 500 ml	Per Unit		
97	Platelete Diluting Fluid(Platelet Count)	Each 500 ml	Per Unit		
98	Blood Grouping (ABO-RH typing)(ANTI-A,ANTI-B,ANTI-A,B,ANTI-D,ANTI-H,ANTI-A1,BOVINE ALBUMIN,Antigen for Red Cell Pannel)	Each 10 ml	Per Unit		
99	JSB Stain-I,JSB Stain-II(Malaria Parasite)	Each	Per Unit		
100	3.8% Sodium Citrate Solution(ESR)	Each 500 ml	Per Unit		
101	Coombs Reagent (Direct & Indirect)(AHG Anti C3d monoclonal)	Each 250 ml	Per Unit		
102	Laboratory Stain(Giema Stain,leishman Stain)	Each 500 ml	Per Unit		
103	Immersion Oil(Microscope)	Each 25 ml	Per Unit		
104	Occult Blood	Each	Per Unit		
105	PT Reagent(Prothombin Time)	Each	Per Unit		
106	RPR Card (Syphilis)	Each	Per Unit		
107	HIV Rapid	Each	Per Unit		
108	Rheumatois Factor(Rh Typing)	Each	Per Unit		
109	ASO	Each	Per Unit		
110	HbsAg (Rapid)	Each	Per Unit		
111	CRP	Each	Per Unit		
112	Uri-Stick	Each	Per Unit		
113	Pregnancy Kit	Each	Per Unit		
114	Malaria Rapid	Each	Per Unit		
115	Dengue Kit	Each	Per Unit		

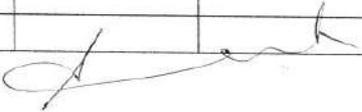

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116	Toxoplasma(Rapid)	Each	Per Unit		
117	Hepatitis B&C card test	Blood/Serum/Plasma	Per Unit		
118	Troponin-I	Each	Per Unit		
119	H2S Strip	Each	Per Unit		
120	Blood Sugar (Lab method)	Each	Per Unit		
121	Blood Sugar(Glucometer Strip)	Each	Per Unit		
122	Blood Sugar(Glucometer Strip with lancet)	Each	Per Unit		
123	Blood urea,	Each	Per Unit		
124	S. creatinin	Each	Per Unit		
125	S.Bilirubin (T)	Each	Per Unit		
126	Bilirubin (D)	Each	Per Unit		
127	SGOT	Each	Per Unit		
128	SGPT	Each	Per Unit		
129	S.Alkaline Phosphate	Each	Per Unit		
130	S.Total Protein	Each	Per Unit		
131	S.Albumin	Each	Per Unit		
132	S.Calcium/Potacium/Sodium	Each	Per Unit		
133	S.LDH	Each	Per Unit		
134	S.Amaylase	Each	Per Unit		
135	S.Uric Acid	Each	Per Unit		
136	S.Cholesterol	Each	Per Unit		
137	S.Triglyceride	Each	Per Unit		
138	S.VLDL	Each	Per Unit		
139	S.HDL	Each	Per Unit		
141	Pipette Tips	Each	Per Unit		
142	Urine Collection bottle	Each	Per Unit		
143	EDTA sample Tube	Each	Per Unit		
146	Plastic Test Tube	Each	Per Unit		
147	B T, CT Capillary Tube	Each	Per Unit		
148	Weight Machine	Each	Per Unit		
149	Hemoglobino Meter (Sahils)	Each	Per Unit		
150	W B C Diluting Pipette	Each	Per Unit		
151	Glucose	Each	Per Unit		
152	Urea	Each	Per Unit		
153	Creatinine	Each	Per Unit		
154	Triglyceride	Each	Per Unit		
155	cholesterol	Each	Per Unit		
156	LDL	Each	Per Unit		
157	Billirubin Total	Each	Per Unit		
158	Billirubin Direct	Each	Per Unit		
159	SGPT	Each	Per Unit		
160	SGOT	Each	Per Unit		
161	ALP	Each	Per Unit		
162	Uric Acid	Each	Per Unit		
163	Amilase	Each	Per Unit		
164	Lipase	Each	Per Unit		
165	ASO	Each	Per Unit		

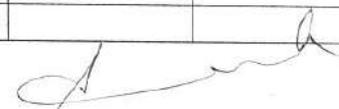


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166	CRP	Each	Per Unit		
167	RA factor	Each	Per Unit		
168	Labtrol H Caliberetor	Each	Per Unit		
169	Labtrol H Normal	Each	Per Unit		
170	Labtrol H Pathological	Each	Per Unit		
171	Reaction Rotter	Each	Per Unit		
172	Sample Cup	Each	Per Unit		
173	MICRO PIPETTE	0.5 to 5 μ L	Per Unit		
174	Micro Pipette	100 to 1000 μ L	Per Unit		
175	Micro Pipette	5 to 50 μ l	Per Unit		
176	JSB-I	500 ML	Per Unit		
177	JSB-II	500 ML	Per Unit		
178	Liesman Stain	250 ML	Per Unit		
179	Capillary Tube (BT, CT)	Each	Per Unit		
180	Plain Vial	Each	Per Unit		
181	Test Tube (Glass) 5 ML	Each	Per Unit		
182	Pipette (Small)	Each	Per Unit		
183	Pipette (Big)	Each	Per Unit		
184	Grouping kit	Each 10 ml	Per Unit		
185	Spirit	Each 500 ml	Per Unit		
186	HP test strip	Each	Per Unit		
187	S. totl cholestrol	4X25ML (SEMI AUTO ANA LYSER)	Per Unit	AGD	
188	S.Cholesterol	4X25ML	Per Unit	AGD	
189	S.Triglyceride	2X25 ML	Per Unit	AGD	
190	S.VLDL	2X20 ML	Per Unit	AGD	
191	S.HDL	2X20 ML	Per Unit	AGD	
192	S. Amylase	1X10 ML	Per Unit	AGD	
193	S.Total Protein	4X50 ML	Per Unit	AGD	
194	SGOT	2X25 ML	Per Unit	AGD	
195	SGPT	2X25 ML	Per Unit	AGD	
196	S.Alkaline Phosphate	25 ML	Per Unit	AGD	
197	S.Bilirubin (D)	4X25 ML	Per Unit	AGD	
198	S.Bilirubin (T)	4X25ML	Per Unit	AGD	
199	S. creatinin	2X100ML	Per Unit	AGD	
200	Blood urea	4X25 ML	Per Unit	AGD	
201	Blood Sugar	5X100 ML	Per Unit	AGD	
202	Microcentrifuge Tube	2 ML	Per Unit	Tarson	
203	Microcentrifuse Tube	1.5 ML	Per Unit	Tarson	
204	Micropipette	0.5-10 μ	Per Unit	Tarson	
205	Micropipette	20-200 μ	Per Unit	Tarson	
206	Micropipette Tips (Plain Tips/Filter Tips)	0.5-10 μ	Per Unit	Tarson	
207	Micropipette Tips (Plain Tips/Filter Tips)	20-200 μ	Per Unit	Tarson	
208	Micropipette Tips (Plain Tips/Filter Tips)	100-1000 μ	Per Unit	Tarson	
209	ethanol (99%)	500 ml	Per Unit		

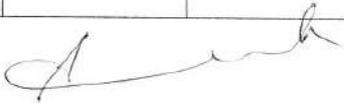

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210	Nitrile Gloves	large	Per Unit		
211	Nitrile Gloves	Medium	Per Unit		
212	PCR plate (96 well)	cat no- 621030	Per Unit	Tarson	
213	PCR plate seller	Each	Per Unit		
214	PCR strips	Each	Per Unit	Tarson	
215	Wet Tissue paper	Alcohol based wet wipes 200 per pkt	Per Unit		
216	Chyrochill TM Tubes	1.8 ml	Per Unit	Tarson	
217	MCT stand	Each	Per Unit		
218	VTM Stand	Each	Per Unit		
219	Syphilis Kit	Each	Per Unit		
220	Urine container	30 ML	Per Unit		
221	10 Digit urine stick (10 Para)	30 ML	Per Unit		
222	ESR tube set with vial(Use and Throw)	Each	Per Unit		
223	Floride vial	Each	Per Unit		
224	Glass cover slip	Each	Per Unit		
225	Plastic pipette	Each	Per Unit		
226	Test tube Holder	Each	Per Unit		
227	Glycial Acetic acid	500 ml	Per Unit		
228	Stool OB Card	Each	Per Unit		
229	HIV Rapid Kit	Each	Per Unit	Standard Q	
230	Blood Bag(350 ml)	Each	Per Unit		
231	Blood bag(1000 ml)	Each	Per Unit		
232	HCV Rapid kit	Each	Per Unit	StandardQ	
233	HBsAG Rapid kit	Each	Per Unit	Standard	
234	Malaria Rapid kit	Each	Per Unit	Standard	
235	VDRL Rapid kit	Each	Per Unit	Standard	
236	HIV ELISA	Each	Per Unit	QUALISA	
237	HCV ELISA	Each	Per Unit	QUALISA	
238	HBsAG ELISA	Each	Per Unit	QUALISA	
239	Anti Sera (A)	10ML	Per Unit		
240	Anti Sera (B)	10ML	Per Unit		
241	Anti Sera (D)	10 ML	Per Unit		
242	Hypochloride Solution1%,10%	5 LIT	Per Unit		
243	Normal Saline	500 ML	Per Unit		
244	3.8%Sodium Citrate Solution	500 ML	Per Unit		
245	Dettol Hand Wash Liquid	Each	Per Unit		
246	Sanitizer	500 ML	Per Unit		
247	Hand Gloves 6.5 (Examination)	Each	Per Unit		
248	Hand Gloves 7 (Examination)	Each	Per Unit		
249	Band Aid	Each	Per Unit		
250	Micropore	2.5 CM&9.1 M	Per Unit		
251	Micropipette Tips Small	10-200	Per Unit		
252	Clot Activator Tube	Each	Per Unit		
253	ISE PACK	Each	Per Unit	AGD	
254	B P Instrument Mercury	Each	Per Unit		
255	B P Instrument Anured	Each	Per Unit		



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256	Thermometer Digital	Each	Per Unit		
257	Thermometer Mercury	Each	Per Unit		
258	Bendid Solution	500 ml	Per Unit		
259	Test Tube(Glass) 10 ml	Each	Per Unit		
265	HBsAG truenat Test kit	Each	Per Unit		
266	HCV Truenat test kit	Each	Per Unit		
267	HBsAG Blood Based Rapid Test kit	Each	Per Unit		
268	Scrub Typhus Elisa kit	Each	Per Unit		
269	Scrub Typhus Rapid Test kit	Each	Per Unit		
270	Leptospirosis Elisa Kit	Each	Per Unit		
271	Leptospirosis Rapid Test Kit	Each	Per Unit		
272	Conical flask 100 ml	Each	Per Unit	Borosil	
273	Conical flask 250 ml	Each	Per Unit	Borosil	
274	Conical flask 500 ml	Each	Per Unit	Borosil	
275	Measuring Cylinder 10 ml	Each	Per Unit	Borosil	
276	Measuring cylinder 100 ml	Each	Per Unit	Borosil	
277	Measuring cylinder 250 ml	Each	Per Unit	Borosil	
278	Measuring cylinder 1000 ml	Each	Per Unit	Borosil	
279	Petriplates glass	Each	Per Unit	Borosil	
280	Beaker glass 500 ml	Each	Per Unit	Borosil	
281	Beaker glass 1000 ml	Each	Per Unit	Borosil	
282	Test tube(Rinless)glass 12*75	Each	Per Unit	Borosil	
283	Test tube glass 13 ml	Each	Per Unit	Borosil	
284	Test tube glass 13 20 ml	Each	Per Unit	Borosil	
285	Test tube glass 38 ml	Each	Per Unit	Borosil	
286	Volumetric flask 100 ml	Each	Per Unit	Borosil	
287	Volumetric flask 250 ml	Each	Per Unit	Borosil	
288	Volumetric flask 500 ml	Each	Per Unit	Borosil	
289	Volutric flask 1000 ml	Each	Per Unit	Borosil	
290	Autoclaveble glass bottle 100 ml	Each	Per Unit	Borosil	
291	Autoclaveble glass bottle 250 ml	Each	Per Unit	Borosil	
292	Autoclaveble glass bottle 500ml	Each	Per Unit	Borosil	
293	storage vial 5 ml	Each	Per Unit	Borosil	
294	storage viel 10 ml	Each	Per Unit	Borosil	
295	wash bottle 500 ml	Each	Per Unit	Borosil	
296	Test tube rack	Each	Per Unit		
297	Indicator paper PH-1.0-14.00	Each	Per Unit		
298	Auto clave Indicator/ ok strip	Each	Per Unit		
299	H2S test kit	Each	Per Unit		
300	OT Test Kit	Each	Per Unit		
301	Haemoglobin estimation test strip	Each	Per Unit		
302	Urine pregnancy test(NISSHAY KIT)	Each	Per Unit		
303	Complete blood count reagent	Each	Per Unit		
304	Kala Azar rapid kit	Each	Per Unit		


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305	Test for iodine in salt(used for food)Test kit	Each	Per Unit		
306	Ortho Toludine Test kit	Each	Per Unit		
307	Water sample collection bottle(H2SGOT)	250 to 30 ml	Per Unit		
308	OK Test strip for Autoclave	Each	Per Unit		
309	Cellotape big	Each	Per Unit		
310	Cellotape small	Each	Per Unit		
311	Aluminium Foil	Each Roll	Per Unit		
312	Hepatitis A&E card test	Blood/Serum/Plasma	Per Unit		
313	Chryochill Gloves	Full sleeves	Per Unit		

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ANNUAL TURN OVER STATEMENT

The Annual Turnover of the tendering firm M/s _____

for the last three years are given below and certified that the statement is true and correct.

<u>Sl.No.</u>	<u>Year</u>	<u>Turnover in Lakhs / Crores (Rs)</u>
1.	2018 - 2019	-
2.	2019 - 2020	-
3.	2020 - 2021	-

Date:

Place:

Signature of Auditor/
Chartered Accountant
(Name in Capital)
Registration No.
Seal



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DELIVERY OF DOCUMENT :

Four (4) copies of the Supplier invoice / bills showing purchase order number, good's description, quantity, unit price, total amount with stock entry certificate by the consignee.

Photocopy of the Insurance Certificate if any (The Original Certificate is to be given to the Consignee).

Packaging :

The supplier shall provide such packaging of the goods as is required to prevent their damage or deterioration during transit to their final destination. The packaging shall be sufficient to withstand without limitation rough handling during transit and exposure to extreme temperature, salt and precipitation during transit and upon storage. All primary packaging containers which come in contact with the item should strictly protect the quality and integrity. Packing case size and weights should be taken into consideration, in case of remoteness of final destination and the absence of heavy handling facilities at all points in transit.

The packaging marking shall show the description of quantity of contents, the name of the consignee and address, the gross weight of the packages, the name of the supplier with a distinctive number of mark sufficient for purposes of identification. Each package shall contain:

- i. A packaging note quoting the name of the purchaser
- ii. The number and date of order
- iii. Nomenclature of the goods
- iv. Name & address of the consignee
- v. Name & address of the supplier.



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DETAILS OF THE BIDDERS & LOCAL CONTACT PERSON

	Corporate Office, (The address in which the purchase orders and payment details will be communicated)	Local Contact Person / Branch Office / Zonal Office / Service Centre if any, in Orissa.
Name & Full Address		
Telephone Nos. landline		
Mobile		
Fax		
E – Mail		
Manufacturing License Nos. & Date		
Name of the issuing authority		

**Signature of the Bidder:
With seal**

Date:

Official Seal:


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CHECK LIST

Please put " " in the respective box

DOCUMENTS : SUBMITTED OR NOT

COVER – A (TECHNICAL BID) “Use separate check list for each items”.

1	Cost of Tender Paper	DD No				Date	
2	Earnest Money Deposit in shape of Demand Draft for Instrument & equipments. Rs.10000.00(Ten thousand only)	DD No				Date	
3	Copy of Valid manufacturing license of the manufacturer or duly acknowledge renewal application with old license issued by the state licensing authority /central licensing approving authority	Yes		No		Page No	
4	Copy of Valid ISO certificate.	Yes		No		Page No	
5	Copy of GST certificate	Yes		No		Page No	
6	Copy of PAN	Yes		No		Page No	
7	The declaration form in Annexure - I duly signed by the tenderer before Notary Public / Executive Magistrate.	Yes		No		Page No	
8	Certificate duly filled by the Auditor / Chartered Accountant (as per Annexure -IV) that the annual turnover of the tendering firm is Rs.50(Twenty) lacs or more in each financial year for last Preceding 3 (three) financial years.	Yes		No		Page No	
9	Details name, address, telephone no., Fax, e-mail of the manufacturer / authorized distributor / service centre / contract person / office in Orissa (Annexure - V & VII).	Yes		No		No	


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MANUFACTURER'S AUTHORISATION FORMAT

To

The C.D.M. & P.H.O Deogarh,
Deptt. of Health & Family Welfare
Govt. of Orissa.

Ref: Tender No. _____ Dated _____ for _____.

Dear Sir,

We _____ who are established and reputed
manufacturer's of _____ (name and description of items offered) having
factories at _____ (Address of Factory) do hereby authorize M/s _____
_____ (Name and address of Distributor / Agent) to submit a bid and sign the
Contract with you against the above referred tender.

We also extend our full guarantee for the items quoted by M/s _____
_____ as per the terms and conditions in your tender

Under reference above.

Yours faithfully,

Name of the Manufacturer
(Signature with seal)

Note: This letter of authority should be on the letter head of the manufacturer and should be signed by a person competent and having the power of attorney to bind the manufacturer. It should be included in the bid submitted by the tenderer if the tenderer is not the manufacturer.



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